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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**



Declaration
Submitted
With Initial
Filing

OR



Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

CAV001.0002

First Named Inventor

Long, Palmer, Jr.

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Velocity induced catalyzed cavitation process for treatment and conditioning of fluids

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/> 	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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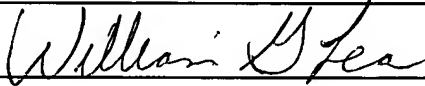
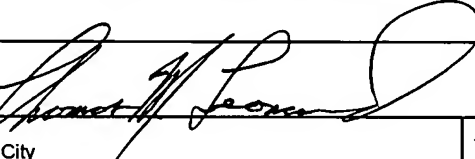
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: <input type="text" value="34487"/> OR <input type="checkbox"/> Correspondence address below			
Name			
Address			
City		State	ZIP
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Palmer		Family Name or Surname Long, Jr	
Inventor's Signature <i>Palmer Long</i>		Date 11/19/03	
Residence: City Shreveport	State Louisiana	Country USA	Citizenship USA
Mailing Address 2140 S. Columbia			
City Tulsa	State Oklahoma	ZIP 74135	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Jim		Family Name or Surname Gregath	
Inventor's Signature <i>James R. Gregath</i>		Date 11/19/03	
Residence: City Oklahoma City	State Oklahoma	Country USA	Citizenship USA
Mailing Address 848 NW 63rd Street, Suite 100 12004 MAPLE RIDGE ROAD			
City Oklahoma City	State Oklahoma	ZIP 73116 73120	Country USA
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet

Page ____ of ____

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
David D.		Leavitt	
Inventor's Signature 		Date 11-14-03	
Broken Arrow Residence: City	Oklahoma State	USA Country	USA Citizenship
415 S. Boston, Ste 711 Mailing Address			
Mailing Address			
Tulsa City	Oklahoma State	74103 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
William G.		Lea	
Inventor's Signature 		Date Nov 14 03	
Tulsa Residence: City	Oklahoma State	USA Country	Citizenship
415 S. Boston, Ste 700 Mailing Address			
Mailing Address			
Tulsa City	Oklahoma State	74103 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Thomas M.		Leonard	
Inventor's Signature 		Date 11/19/03	
Tulsa Residence: City	Oklahoma State	USA Country	USA Citizenship
4145 E. 35th Place Mailing Address			
Mailing Address			
Tulsa City	Oklahoma State	74135 Zip	USA Country

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	
Filing Date	
First Named Inventor	Palmer Long, Jr.
Title	
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:

☒ Practitioners associated with the Customer Number:

34487

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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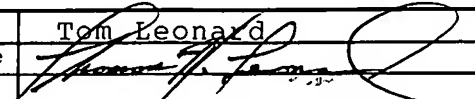
<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Tom Leonard		
Signature			
Date		Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 5 forms are submitted.

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SIGNATURE of Applicant or Assignee of Record

Name	Palmer Long		
Signature	<i>Palmer Long</i>		
Date	11/19/03	Telephone	318-865-7275

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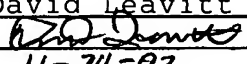
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SIGNATURE of Applicant or Assignee of Record

Name	David Leavitt		
Signature			
Date	11-24-03	Telephone	918 607 9205

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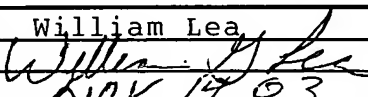
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Name	William Lea		
Signature			
Date	NOV 14 03	Telephone	

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SIGNATURE of Applicant or Assignee of Record

Name	Jim Gregath		
Signature	<i>James R. Gregath</i>		
Date	Nov 19, 2003	Telephone	405-751-4169

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